West Virginia Absentee Ballot Application You must apply separately for each election. *Applications may be received no earlier than 84 days before an election and no later than 6 days before an election.* *Does not apply to reason #6 and #7 — see reason #6 and #7 for details.							
Applying for (select one): Fee		Federal, State or Count	ty election	Municipal Election			
Election Ty	pe (select one):	Primary Election _	General Election	Special Election			
For Primary Elections only, choose ballot:DemocraticRepublicanMountain Non-Partisan Note: If you are registered with the Democratic, Republican or Mountain party, you may only receive that party's primary ballot. Voters unaffiliated with any of these parties may select a party ballot or a non-partisan ballot, subject to party rules governing ballot access for non-party voters.							
Name:		· 	Date of Birth:	ete the information change form on page 2 of this application)			
Mail Ballot To: (Must be outside county of residence if reason checked is #1, 2, 6, 10 or 11) Street:Phone:							
City:		State:	Zip Code:	Country:(If outside the U. S.)			
I am applyir	ng for an absentee b	allot for the following rea	SON: (Check only ONE box	below)			
<u> </u>	Personal or business t						
∐ 2.			_	versity or other place of education or training.			
<u> </u>		·	e confined. Please provide	e the name and telephone number of the doctor who may			
	•	hable to vote in person.					
				Telephone #			
∐ 4. □ -	Immobility due to advanced age or a physical disability.						
<u> </u>	Incarceration or detention in jail or home. I am not under conviction of any felony, of treason or of bribery in an election (including any						
П 6.	period of probation or parole). You must complete the statement on Page 2 of this form if reason #5 is checked. I am an absent Uniformed Service member, spouse or dependent, or an overseas voter as defined by the Uniformed and Overseas						
<u> </u>							
	Citizens Absentee Voting Act of 1986. You may submit this application as early as January 1 of an election year. Check here to receive ballots for all elections in a calendar year. Indicate party designation in "Primary" section (above).						
				Fax (enter below) E-mail (enter below)			
	Fax # (include country code, where applicable) E-mail (print clearly) I was an absent Uniformed Service member, spouse or dependent, and have been discharged from active duty during the 60 days						
	preceding the election. In this case, the voter will be required to cast a provisional absentee ballot by mail after first registering to vote in						
	person at the office of the county clerk.						
□ 8.	Employment which because of hours worked and distance from the county seat makes voting in person impossible.						
9.	I am a participant in the Address Confidentiality Program (ACP) with the Office of the Secretary of State.						
В. <u>I а</u>							
10. Service as an elected or appointed state or federal officer.							
11. Temporary assignment by my employer for a specific period of four years or less.							
C. <u>I an</u>							
<u> </u>							
and registere	d to vote in this count	y. I understand that I must vo	ote in person if I can. <i>I ui</i>	I reside at the address given, and that I am qualified nderstand that making a false statement on this If I require assistance with my ballot, the reason for			
the assistance is stated below and the person who will assist me has signed this form.							
Signature/Mark	of Voter (if "mark," witne	ess must sign this form)	Signature of person	assisting voter/witness to voter's mark (if needed)			
			Reason for assistar	nce, if needed			
	Mail, Fax or a	attach this completed/sign Visit <u>www.wvsos.com</u> f		to your County Clerk's Office. ct information.			

Voter's Change of Name/Address Previous Name and/or WV Residence Address: (List your current name/residence address where indicated on page 1 of this form.)						
Street:	City:	Zip Code:				
Statement of Sheriff, Chie (To be completed for applicants votin	ef of Police or Author	rized Deputy or detention)				
I,	, hereby declare that th	e applicant whose signature appears on				
this application will be confined in the county or city jail	or other detention facili	ty or home confinement on the				
day of, 20, the date of the election	on, and is not under cor	nviction of treason, bribery in an election,				
or felony.						
Name of Detention Facility	Signature					
City/County	Title					

IMPORTANT REMINDER FOR ALL APPLICANTS

- You may NOT vote in person at the polls on Election Day if you have cast an absentee ballot
- This application must be RECEIVED by your county clerk (or municipal clerk for city elections*)
 NO LATER THAN the 6th day before the election. If you are an ACP participant please send your application to the Office of the Secretary of State. *subject to municipal charter provisions
- More information on voter registration and elections, including county clerk contact information, may be found at www.wvsos.com.



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